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Bib Data Sheet

CONFIRMATION NO. 1240

SERIAL NUMBER 10/801,070	FILING DATE 03/15/2004  RULE	CLASS 607	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. 279.718US1
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APPLICANTS

Scott J. Healy, Maple Grove, MN;  
Sylvia Quiles, Edina, MN;  
Jeffrey A. Von Arx, Minneapolis, MN;

\*\* CONTINUING DATA \*\*\*\*\*  
N/A JP

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
N/A JP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 05/31/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 6	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials JP	

ADDRESS  
21186  
SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH  
1600 TCF TOWER  
121 SOUTH EIGHT STREET  
MINNEAPOLIS , MN  
55402

TITLE  
Cryptographic authentication for telemetry with an implantable medical device

FILING FEE  RECEIVED 1946	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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